

ARKANSAS REGISTER

Transmittal Sheet



Charlie Daniels
Secretary of State
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For Office

Use Only:

Effective Date _____ Code Number _____

Name of Agency _____

Department _____

Contact _____ E-mail _____ Phone _____

Statutory Authority for Promulgating Rules _____

Rule Title: _____

Intended Effective Date

Date

<input type="checkbox"/> Emergency	Legal Notice Published	_____
<input type="checkbox"/> 10 Days After Filing	Final Date for Public Comment	_____
<input type="checkbox"/> Other _____	Reviewed by Legislative Council	_____
	Adopted by State Agency	_____

☐ Electronic Copy of Rule Provided (per Act 1648 of 2001)

☐ Electronic Copy of Rule to be e-mailed from: _____

Contact Person

Email Address

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance with Act 434 of 1967 As Amended.

Signature

Phone Number

E-mail Address

Title

Date